

APRU Global Health Conference 2025

Towards Planetary Health Equity: A Global Call for Shared Solutions

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Capacitating Local Government Units for Improved Health Outcomes: A Tri-Sectoral Collaboration Model for Health Leadership Development in the Philippines

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BACKGROUND

- **1991 Local Government Code:** Health services devolved to LGUs to enhance community responsiveness, but inequities, fragmented governance, and weak collaboration persist.
- **Local Chief Executives (LCEs)** and **Municipal Health Officers (MHOs)** lead primary healthcare but need stronger leadership capacities and institutional support.
- The Zuellig Family Foundation introduced the **Health Change Model (2008)** anchored on **Bridging Leadership** through the **Community Health Partnerships Program (CHPP)**, leading to improved maternal and child health outcomes in 72 pilot municipalities.



BACKGROUND

- The CHPP served as the prototyped program, paving the way for a national rollout with the Department of Health (DOH) through the **Health Leadership and Governance Program (HLGP)**, the mother program of the **Municipal Leadership and Governance Program (MLGP)**, developed to strengthen the leadership capacities of LCEs and MHOs.
- **Academic partners** co-implement and institutionalize the program locally, with **DOH-Center for Health Development** guiding and assisting program implementation.





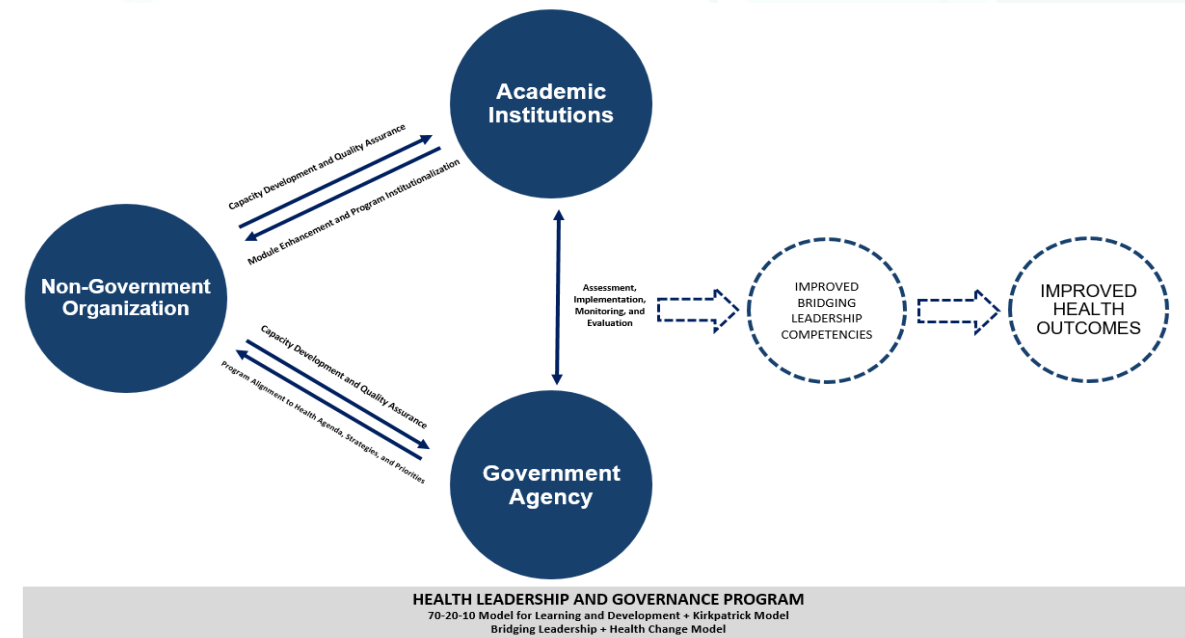
BACKGROUND

Tri-Sectoral Collaboration Model

- Anchored on the Triple Helix Innovation Framework (Etzkowitz, 2008), aligning DOH, academe, and ZFF in delivering leadership development for stronger local health governance.

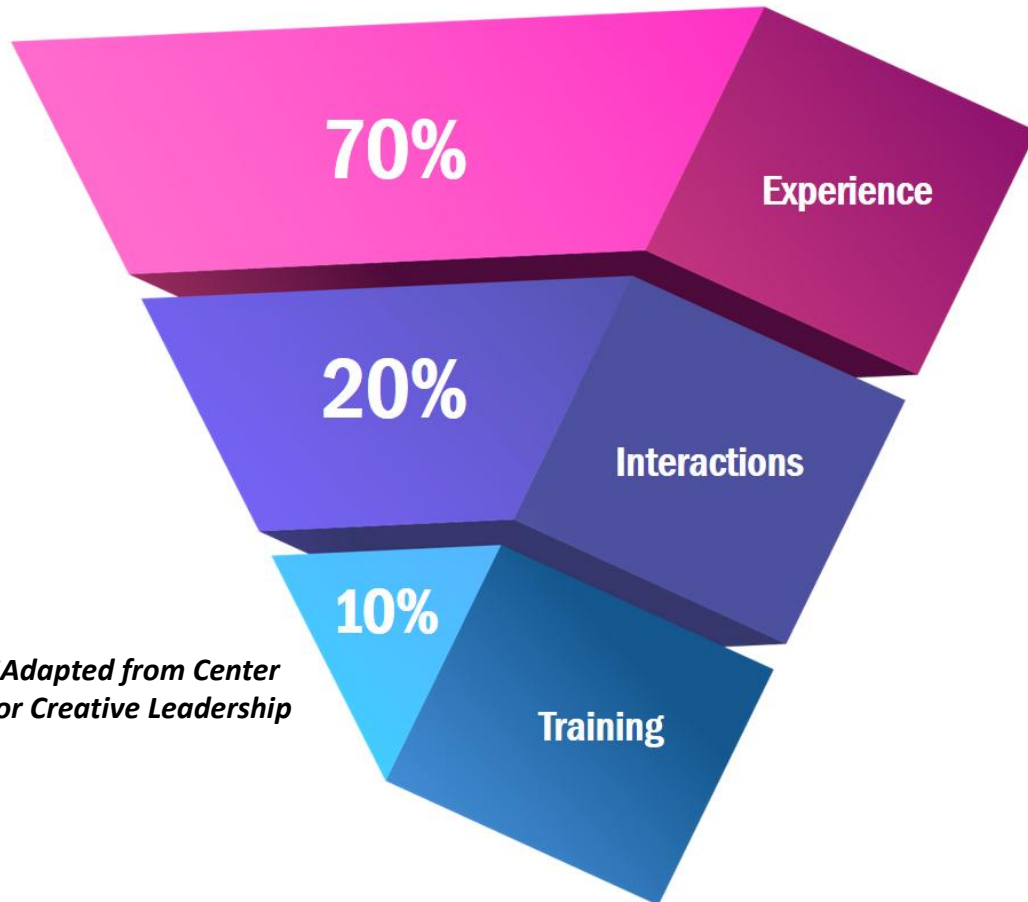
Intended Results

- Strengthened local health systems leading to improved health outcomes.





MATERIALS AND APPROACH



**Adapted from Center
for Creative Leadership*

- **Learning Approach:** Combines instructional and experiential learning through classroom sessions, structured practicum, and M&E.

ZFF leads program design and builds academic partners' capacity for instruction and mentoring; DOH-CHDs support implementation, monitoring, and technical assistance.

- **Results:** Context-specific and sustainable local health interventions (Palompon et al., 2024).



METHODS AND RESULTS

- A qualitative documentary analysis of published literature, primarily peer-reviewed studies on the MLGP, was conducted to substantiate evidence on the competency development of health leaders, which in turn contributed to the strengthening of local health systems and the improvement of health outcomes.
- **Tri-Sectoral Collaboration Model:** Promotes shared ownership, accountability, and collaborative leadership among government, academe, and NGOs.
- **Proven Results:** Strengthened local leadership and governance through evidence-based decision-making, multisectoral collaboration, and community engagement (Palompon et al., 2024; Del Pilar-Labarda, 2019).



CONCLUSION

- As the Philippines accelerates the implementation of Universal Health Care, evidence from the HLGP-MLGP demonstrates that tri-sectoral collaboration provides a proven model for empowering and capacitating local health leaders to strengthen health systems.
- Moving forward, the model will be scaled up by further capacitating partners to take on expanded roles in innovation. This includes **strengthening systems for documentation, data management and analytics**, and **dissemination of results** to inform evidence-based planning and support local government units in sustaining health leadership gains.



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